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## **FACSIMILE COVER SHEET**

<b>Date:</b>	<b>July 6, 2005</b>	<b>Fax:</b>	<b>703-872-9306</b>
<b>To:</b>	<b>U.S. Patent and Trademark Office</b>	<b>Phone:</b>	

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<b>From:</b>	Rachel V. Leiterman
<b>Serial No.:</b>	09/469,652
<b>Docket:</b>	M-9197 US
<b>Re:</b>	Supplemental Response to Office Action
<b>Pages:</b>	10 (including cover sheet)

## **Message:**

Re: Applicant(s): Jonathan J. Wierer, Jr.; Michael R. Krames; Serge L. Rudaz  
Assignee: Lumileds Lighting U.S., LLC  
Title: Multi-Layer Highly Reflective Ohmic Contacts For  
Semiconductor Devices  
Serial No.: 09/469,652  
Examiner: Jerome Jackson Jr. Filed: December 22, 1999  
Docket No.: M-9197 US Group Art Unit: 2815

Dear Sir:

Transmitted herewith are the following documents in the above-identified application:

- (1) Transmittal Letter (1 page);
  - (2) Credit Card Payment Form PTO-2038 (1 page);
  - (3) Supplemental Response to Office Action (5 pages);
  - (4) Terminal Disclaimer (2 pages).

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Brian D. Ogonowsky  
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David C. Hsieh  
Rachel V. Leiterman

Via Facsimile  
Mail Stop AF  
Commissioner for Patents  
P. O. Box 1450  
Alexandria, VA 22313-1450

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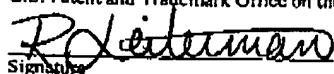
- (1) This Transmittal Letter (1 page);
- (2) Credit Card Payment Form PTO-2038 (1 page);
- (3) Supplemental Response to Office Action (5 pages);
- (4) Terminal Disclaimer (2 pages).

The fee has been calculated as shown below:

	Claims Remaining <u>After Amendment</u>		Highest No. <u>Previously Paid For</u>	Present <u>Extra</u>	Rate	Additional Fee
Total Claims	11	Minus	30	=	0 x \$50	\$ 0.00
Independent Claims	2	Minus	3	=	0 x \$200	\$ 0.00
	<input type="checkbox"/> Fee of _____ for the first filing of one or more multiple dependent claims per application				\$ .	
<input checked="" type="checkbox"/>	Extension of Time Fee (1 month)				\$ 120.00	
<input checked="" type="checkbox"/>	Fee to file Terminal Disclaimer				\$ 130.00	
<input checked="" type="checkbox"/>	Please charge our credit card (Form PTO-2038 enclosed) in the amount of			Total	\$ 250.00	
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Respectfully submitted,

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Rachel V. Leiterman  
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